



053
1001

03-03-20

William Dempsey	Folio No. :	172321	Room No. :	421
11015 ne 96th st	A/R Number :		Arrival :	02-11-20
Kirkland WA 98033	Group Code :		Departure :	02-12-20
United States	Company :	Best Flex	Conf. No. :	44977983
	Membership No. :		Rate Code :	IGCOR
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
02-11-20	*Accommodation	135.00	
02-11-20	State Tax - Room	8.78	
02-11-20	City Tax - Room	2.30	
02-11-20	Occupancy Room Tax	4.05	
02-11-20	County TPA	2.00	
02-12-20	Visa XXXXXXXXXXXXX4109		152.13
Total		152.13	152.13
Balance		0.00	

Guest Signature: _____

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.